

PTO/SB/21 (05-04)

Approved for use through 07/31/2006. OMB 0551-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE*Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.***TRANSMITTAL
FORM***(to be used for all correspondence after initial filing)*Total Number of Pages in This Submission **2**Application Number **10/760,378**Filing Date **January 21, 2004**First Named Inventor **Dwight L. ADAMIC,**Art Unit **3671**Examiner Name **RECEIVED
CENTRAL FAX CENTER****JUN 14 2005**Attorney Docket Number **PAT 844-2****ENCLOSURES (Check all that apply)**

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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
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| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
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| <input type="checkbox"/> Affidavits/declaration(s) | <input checked="" type="checkbox"/> Power of Attorney, Revocation | <input type="checkbox"/> Status Letter |
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| Remarks | | |
| Fax: 703-872-9306 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---------------------------|----------|--------|
| Firm Name | Borden Ladner Gervais LLP | | |
| Signature | | | |
| Printed name | Dilip C. Andrade | | |
| Date | June 14, 2005 | Reg. No. | 53,942 |

CERTIFICATE OF TRANSMISSION/MAILING

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Dilip C. Andrade

Date June 14, 2005

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PTO/SB/83 (04-05)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|-------------------|
| Application Number | 10/760,378 |
| Filing Date | January 21, 2004 |
| First Named Inventor | Dwight L. ADAMIC, |
| Art Unit | 3671 |
| Examiner Name | |
| Attorney Docket Number | PAT 844-2 |

RECEIVED**CENTRAL FAX CENTER**

JUN 14 2005

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number 28123

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Ownership of the application has changed, the new owner has requested transfer of the application to new representatives (specified below as the correspondent)

CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
 2. Change the correspondence address and direct all future correspondence to:

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|-------------------------------------|-------------------------|---|-------|------------------|----------------|-------|
| <input checked="" type="checkbox"/> | Firm or Individual Name | Mr. Steven Schad ESCO Corporation | | | | |
| Address | | 2141 Northwest 25th Avenue | | | | |
| City | | Portland | State | Oregon | Zip | 97210 |
| Country | | UNITED STATES OF AMERICA | | | | |
| Telephone | | | | | Email | |
| Signature | |  | | | | |
| Name | Dilip C. Andrade | | | Registration No. | 53,942 | |
| Date | June 14, 2005 | | | Telephone No. | (613) 237-5160 | |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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